

**Trauma System Oversight and Management Committee**  
**Marriott Richmond-West**  
**Richmond, Virginia**  
**March 6, 2008 at 11:00 am**

<b>Members Present:</b>	<b>OEMS Staff:</b>	<b>Guests:</b>
Morris Reece – Chair	Paul Shape	Cindy Hearrell
Lisa Wells	David Edwards	Carol Gilbert
Barbara Hawkins	Jodi Kuhn	Mark Dietz
DeeDee Soyars	Wanda Street	Steve Ennis
Kathy M. Butler	Russ Stamm	Edward Fenton
Valeria Mitchell		Bobby Baker
Lou Ann Miller		Sue Bergstrom
Rao Ivatury		Larry Roberts
DJ Douglas		
Denice Greene		
Mindy Carter		
Raymond Makhoul		
Nancy Martin		
Elton Mabry		
Patrick Earnest		
Leanna Harris		
Leonard Weireter		

<b>Topic/Subject</b>	<b>Discussion</b>	<b>Recommendations, Action/Follow-up; Responsible Person</b>
<b>Trauma Nurse Coordinators Meeting:</b>	The trauma nurse coordinators met between 9 a.m. and 10 a.m. and discussed the trauma triage process and then general business matters. The Trauma Fund Panel also met from 10 a.m. to 11 a.m.	
<b>Call to order:</b>	The full TSO&MC meeting was called to order by Mr. Reece at 11:02 a.m.	
<b>Introductions of first time guests:</b>	All in attendance introduced themselves.	
<b>Supply Cache for Mass Casualties Meeting</b>	Dr. Carol Gilbert stated that at the present time the Virginia Hospital Emergency Management came up with some additional principles. The main focus was on duration and magnitude of an incident. The trauma committee and the emergency planners met in December to discuss having supply caches in the event of a large scale emergency such as the Katrina Hurricane or other major catastrophe. They wanted to use items that had no expiration dates	

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	<p>and do not require electricity. A draft list of medical supplies has been created that will assist them in treating burn, orthopedic, and eye injuries. The draft list of supplies included items such as:</p> <ul style="list-style-type: none"> <li>Blankets, water and MRE's</li> <li>Intravenous supplies, 24 to 16 gauge</li> <li>Splinting materials</li> <li>Dressings and toppings</li> <li>Face masks</li> <li>Large supply of Sterile sheets which can be used as dressings as well</li> <li>Pharmaceuticals - Silvadene, Morphine and Tetanus</li> <li>Eye injury kits, including antibiotics, 2x2s and 4x4s</li> </ul> <p>Kathy Butler suggested that the caregiver aspect be considered i.e. having plenty of camelbacks for water or Gatorade, headlamps that come with batteries, personal hygiene products, scrubs (adult and pediatric sizes), footies, and lifesavers candy. Also blood pressure cuffs and disposable thermometers. Silvadene is now considered hazardous waste and cannot be disposed of by normal means. Refrigeration would need to be considered for Tetanus. It would also be good to have some type of tool belt or apron for nurses and doctors to carry supplies in.</p> <p>Other items suggested by committee members were: tourniquets and skin staplers.</p> <p>Per Steve Ennis, it should be the goal of the committee to put together a list of items in which you can be self-sufficient for at least 96 hours (4 days).</p> <p>Dr. Gilbert stated that hospitals may want to check with their Regional Hospital Coordinating Centers because they have a lot of supplies already.</p> <p>Morris Reece announced that on May 6-8, 2008, the 7th Annual Emergency Preparedness Forum will be held in Williamsburg. The cost is \$45 and registration deadline is April 1. For more information, click on the link below: <a href="http://www.vhha.com/uploads/documents/live/EMF2008Participant.pdf?CFID=30052632&amp;CFTOKEN=44474367">http://www.vhha.com/uploads/documents/live/EMF2008Participant.pdf?CFID=30052632&amp;CFTOKEN=44474367</a></p> <p>The committee took a break for lunch at 12:00 and resumed at 12:30.</p>	
<b>Approval of Minutes from December 6, 2007 meeting:</b>	The minutes were approved as submitted. DeeDee Soyars reported a name change in her Trauma Center Update. The doctor's name should have been Dr. Bass and not Dr. Batts.	A motion was made to approve the minutes with the name change.
<b>Chair/Vice Chair Report:</b>	The chair asked OEMS staff to speak on his behalf concerning the Trauma Fund. The Trauma Panel met this morning and greatest topic of discussion was the pending legislative actions that threaten to transfer some of the trauma center funding to the Commonwealth's General Fund. The only area of significant discussion was trying to set some baseline level of funding that each center could be fairly certain they would receive because ongoing items such as FTE's that were achieved because of the trauma center fund.	
<b>OEMS Updates:</b>	<p><b>Jodi Kuhn – Statistician</b></p> <p>OEMS has received many requests for data from the trauma registry including research related projects. We are begun new efforts to monitor and intervene as needed on the quality of the data since implementation of the new</p>	

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	<p>registry and compliance has been achieved. OEMS is working is compiling data to review the trauma triage process which is now in its tenth year. OEMS is focusing mainly on length of stay, admission location, and deaths occurring at non-designated hospitals. We are also conducting a statewide survey of EMS providers to determine their levels of self-efficacy in regards to managing a trauma patient.</p> <p><b>David Edwards – EMS for Children (EMSC)</b>  <b>Flex Grant Funding to Support Pediatric Hospital Classification</b>  A memorandum of agreement (MOA) has been finalized allowing OEMS to spend \$10,000 in grant money to support assessing and improving critical access hospital (CAH) capabilities in regard to pediatric emergency care. Site visits, educational packets and equipment incentives will be primary tools in achieving these objectives.</p> <p><b>EMSC “Performance Measures” Surveys</b>  Surveys will soon be distributed to hospitals and EMS agencies to aid in establishing baseline data regarding the Performance Measures specified in the federal EMS for Children (EMSC) Program (partially funded under the HRSA EMSC State Partnership Grant to OEMS). This data will be collected annually for at least three years, and is designed to monitor national progress toward accomplishing specific EMSC objectives.</p> <p><b>Legislation Amending Mandated Reporting of Child Abuse/Neglect</b>  The EMSC Committee, at their January 17th meeting discussed proposed Senate Bill 228, which would amend existing legislation by adding certified EMS personnel who have had the appropriate training as mandated direct reporters of suspected child abuse/neglect. The Committee unanimously supports the bill (and its only known substitute) and looks forward to EMS providers assuming this responsibility; one which is already shared by Virginia physicians, nurses, law enforcement, teachers, social workers, mental health workers, etc. Discussion of the issue also addressed the development of potential training and educational aids appropriate for EMS personnel, should the legislation be successful.</p> <p><b>Child Restraints in Ambulances</b>  The EMSC Committee also discussed plans for OEMS to become a Web resource for “Best Practices” in restraining children, whether patient or passenger, while they are riding in Virginia ambulances. OEMS recently participated in several “webinars” sponsored by the EMS Safety Foundation as part of this project.</p> <p><b>Russ Stamm – Trauma Registry</b>  The Trauma Registry was updated to version 5.6 in February. Two hospitals have fallen into non-compliance Sentara Bayside Hospital and HCA Retreat Hospital. Sentara Bayside Hospital has responded to their notification and state they will work getting back in compliance.</p> <p><b>Paul Sharpe – Trauma Coordinator</b>  <b>New State Health Commissioner</b>  OEMS and VDH would like to announce that we have a new state health commissioner, Dr. Karen Remley. She seems like a very dynamic person with an extensive health background. Dr. Remley attended our March 4th program manager’s meetings and also attended our last Governor’s Advisory Board meeting which was held on</p>	

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	<p>February 7th.</p> <p><b>Medevac</b> The Medevac program will be moved from the Trauma/Critical Care Division to our EMS systems planner, Tim Perkins, due to the Stroke Triage Plan being passed by the House and Senate. The OEMS portion of Stroke Triage will be overseen by the Trauma Division. We will probably ask at the next meeting to have a representative from this committee join the Medevac committee to keep that connection working cohesively.</p> <p><b>Staffing Changes</b> Trauma/Critical Care has had some personnel changes that recently occurred or will occur in the near future and they include: Jodi Kuhn's position has been reclassified and moved up a pay grade. The trauma registry coordinator and PPCR coordinator positions now fall under the statistician. Also, a new Performance Improvement Coordinator will be hired soon will also fall into this new work unit called the Emergency Medical Informatics Programs. Long term plans will add a statistician with geographical information systems (GIS) training</p> <p><b>New PPCR Contractor Hired</b> OEMS has hired a VITA Approved project management contractor, David Dishner, to assist with the replacement of the PPCR program with the new EMS Registry program.</p>	
<b>Trauma Center Updates:</b>	<p><b>Montgomery Regional Hospital, DJ Douglas</b> – (Inaudible – recorder did not pick up.)</p> <p><b>New River Valley Medical Center, Patrick Earnest</b> – About 7 weeks ago, Lifeguard 11, began being stationed at New River. Currently LG11 is in temporary quarters until it moves to its permanent position up on the hill. The crew is also temporarily stationed in the hospital. New River will host a Child Safety Day on May 17<sup>th</sup> which is supported by a \$1,500 mini grant from the Department of Motor Vehicles. Last year we gave out about 150 helmets, this year with the public health pact with the Health Department, we will promote this program at about 12 different schools. June 27<sup>th</sup> is our Trauma Symposium.</p> <p><b>UVA, Kathy Butler</b> – This week we have JCAHO doing their lab visits. Our biggest issue currently in capacity. UVa opened a ten bed ICU this week so that will slightly help. An ICU tower and medical center will be built over the next few years, so there will be massive construction all over the university. Our emergency preparedness efforts have increased recently in the event there should be a major construction collapse.</p> <p><b>INOVA Fairfax Hospital, Denice Greene</b> – Inova will have six TNCC courses coming up. We will have our first ATCN course in May. Our Trauma Symposium will be in April. We just hired a new PI Manager. Our prevention coalition focus this year will be on Teen Drinking and Driving.</p> <p><b>Winchester Medical Center, Lisa Wells</b> – Winchester is currently recruiting ENT Surgeons. We hired an oral surgeon who will be starting in July. Just recently had TNCC class in February. We just finished with JCAHO. The hospital is looking into building an ICU tower to add to the heart center. We had an increase in our pneumonia at the beginning of this year.</p>	

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	<p><b>VCU Medical Center, Nancy Martin</b> – VCU is having our Trauma Symposium on April 9 called ‘Trauma 2008: Special Populations, Special Challenges’ and then our Trauma Nursing Symposium on September 18. ATCN courses will be held in May and October. The Southeastern Burn Conference is October 30 &amp; 31. Our surgical trauma ICU won the “Beacon Award” through the American Association of Critical Care Nurses. Our new critical care bed tower should be finished by November 2008 and it looks beautiful.</p> <p><b>Sentara VA Beach General, Leanna Harris</b> – Virginia Beach has been active providing injury prevention programs including a Teen Drinking and Driving program today and a Bicycle Safety program in April.</p> <p><b>Centra Health/Lynchburg General Hospital, DeeDee Soyars</b> – Dr. Bass is back from Iraq. On May 22, we are also having a Trauma Conference with the Emergency Nurses Group in our area. I’ll be attending the TNCC instructor course next week. We may be offering an ATLS Course or an ATLS instructor course soon.</p> <p><b>Sentara Norfolk General Hospital, Valeria Mitchell</b> – We recently hired a new registrar. Our Nurse Practitioner just started in January. Back in January we offered an ABLIS course attended by approximately 25 nurses &amp; physicians from our facility and representatives from other hospitals also attended. We are coordinating with the Department of Parks and Recreation this summer to offer a program for high risk kids. Dr. Weireter added that they are looking to hire a research coordinator.</p> <p><b>Riverside Regional Medical Center, LouAnn Miller</b> – Riverside had one TNCC course this year and will have another one in July and then one in the fall. On May 27<sup>th</sup> we are providing the “Every 15 Minute” program. In July we will also have a kids camp.</p> <p><b>Chippenham Medical Center, Mindy Carter</b> – CJW has been using our new database to perform a benchmark study to compare our data with other level III trauma centers across the nation. We will have 6 more TNCC classes by the end of the year.</p> <p><b>Southside Regional Medical Center, Elton Mabry</b> – Southside is on track to move into our new hospital by July 15. We will have a TNCC class the end of April.</p> <p><b>Sue Bergstrom, Mary Washington Hospital</b> – (Inaudible – recorder did not pick up).</p> <p><b>Barbara Hawkins</b> – No report/comments.</p> <p>(The updates may or may not reflect all that was reported due to the extremely high noise level of the meeting being held in the next room OEMS has communicated this issue in detail to the Marriott staff.)</p>	
<b>Old Business</b>	ATLS Requirements for non-boarded ED physicians. OEMS handed out a memorandum which stated that any physician functioning as an emergency department physician who is not currently a board certified emergency physician by an accepted certifying body, must possess current ATLS certification. (the memo is attached to these minutes for future reference)	

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<b>New Business</b>	None.	
<b>Adjournment</b>	Meeting was adjourned at approximately 1:43 p.m. The next meeting is June 5, 2008.	